FEC FORM 2 STATEMENT OF CANDIDACY

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(a) Name of Candidate (in full)				
Mimi Walters			MAIL CENTER	
(b) Address (number and street)	☐ Check if address of	changed	2. Candidate's FEC Iden	tification Number
c/o 8001 Irvine Center Dri	/e, #400		H4CA45097 3. Is This Ne	w Amended
			3. Is This Ne Ne Statement X (N)	3 1
Irvine CA 92618 4. Party Affiliation	5. Office Sought	6. State & Di	strict of Candidate	
Republican Party	House	CA 4	5	
DE	SIGNATION OF PRIN			
7. I hereby designate the following na			(year of elect	election(s). tion)
NOTE: This designation should be	illed with the appropriate office I	listed in the instructions	i.	
(a) Name of Committee (in full) Walters for Congress				
(b) Address (number and street)				
c/o 8001 Irvine Center D	rive, #400			
(c) City, State, and ZIP Code				
Irvine CA 92618				
I hereby authorize the following na- candidacy. NOTE: This designation should be	med committee, which is NOT n	Fundraising Representa ny principal campaign c	tives)	pend funds on behalf of my
(a) Name of Committee (in full)				
Mimi Walters Victory Fun	d			
(b) Address (number and street)				·
(c) City, State, and ZIP Code	, #400			
Irvine , CA 92618				
	amined this Statement and to th	ha bast of my knowledg	o and bolist it in true accreat	and complete
Signature of Candidate Muu M	ally		11/25/1	4
NOTE: Submission of false, erroneou	s, or incomplete information ma	y subject the person sig	ning this Statement to penal	ties of 2 U.S.C. §437g.
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